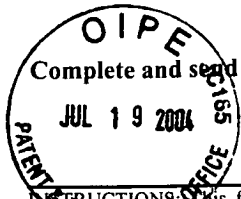


PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(703) 746-4000**

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

04/19/2004

**Kirschstein Ottinger
Israel & Schiffmiller
489 Fifth Avenue
New York, NY 10017-6105**

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<i>Levi G. Winkler</i>	(Depositor's name)
<i>Levi G. Winkler</i>	(Signature)
<i>July 19, 2004</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/088,827

07/03/2002

Sukbir Pannu

P61834-PCT

5269

TITLE OF INVENTION: DROPLET GENERATOR FOR A CONTINUOUS STREAM INK JET PRINT HEAD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1330

\$0

\$1330

07/19/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
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PEGGINS, KRISTAL J

2861

347-073000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. *KIRSCHSTEIN, Israel*

2. _____

3. _____

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(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

VIDEOJET TECHNOLOGIES INC.

WOOD DALE, ILLINOIS

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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ALAN ISRAEL Reg. No. *41,564*

(Date)

7/19/2004

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